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011604



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**UTILITY PATENT  
APPLICATION TRANSMITTAL LETTER**

**MAIL STOP PATENT APPLICATION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Customer No. **21839**

Sir:

Enclosed for filing is the utility patent application of Zongcen Charles Xie, Jeffrey A. Pierce and Carol R. Stivers, for METHODS AND SYSTEMS FOR POINT OF CARE BODILY FLUID ANALYSIS.

Applicant(s) suggest(s) Figure 5 for inclusion on the front page of the patent application publication and patent.

Applicant(s) requests that the published application include the following assignment information: \_\_\_\_\_.

Also enclosed are:

4 sheet(s) of drawings;

a claim for foreign priority under 35 U.S.C. §§ 119 and/or 365 is  hereby made to \_\_\_\_\_ filed in \_\_\_\_\_ on \_\_\_\_\_;

in the declaration;

a certified copy of the priority document;

a General Authorization for Petitions for Extensions of Time and Payment of Fees;

an Assignment document;

an Information Disclosure Statement;

a patent application data sheet; and

Other: Application Cover Sheet; return postcard

An  executed  unexecuted declaration of the inventor(s)  
 also is enclosed  will follow.

Small entity status is hereby claimed.

The filing fee has been calculated as follows [ ] and in accordance with the enclosed preliminary amendment:

C L A I M S					
	NO. OF CLAIMS		EXTRA CLAIMS	RATE	FEE
Basic Application Fee					770.00
Total Claims	24	MINUS 20 =	4	$\times 18.00 =$	72.00
Independent Claims	5	MINUS 3 =	2	$\times 86.00 =$	172.00
If multiple dependent claims are presented, add 290.00					0
Total Application Fee					1,014.00
If small entity status is claimed, subtract 50% of Total Application Fee					507.00
Add Assignment Recording Fee if Assignment document is enclosed					
<b>TOTAL APPLICATION FEE DUE</b>					<b>507.00</b>

This application is being filed without a filing fee. Issuance of a Notice to File Missing Parts of Application is respectfully requested.

A check in the amount of \$ \_\_\_\_\_ is enclosed for the fee due.

Charge \$ \_\_\_\_\_ to Deposit Account No. 02-4800 for the fee due.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Please address all correspondence concerning the present application to:

BURNS, DOANE, SWECKER & MATHIS, LLP

Customer Number: **21839**

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Alexandria, Virginia 22313-1404.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, LLP

Date: January 16, 2004

By:

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